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FACSIMILE SUBMISSION UNDER 37 CFR 1.8

TO:	FROM:
Examiner Kristin Driesch Mullen	Jason D. Kelly
COMPANY:	DATE:
U.S. Patent and Trademark Office	NOVEMBER 2, 2004
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
1-703-872-9306	4
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
1-703-605-1185	1023-011US01
RE:	APPLICATION SERIAL NUMBER:
Response to Restriction Requirement	09/992,708

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PATENTIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Glen D. Caby; James S. Confirmation No. 7472
Neumiller; Jyhlin Chang;
Curtis R. Jordan; Dana J.
Olson; Ward A. Silver;
Scott O. Schweizer

Serial No.: 09/992,708

Filed: November 19, 2001 Customer No.: 28863

Examiner: Kristen Droesch Mullen

Group Art Unit: 3762

Docket No.: 1023-011US01

Title: INTERNAL MEDICAL DEVICE COMMUNICATION BUS

CERTIFICATE UNDER 37 CFR 1.8 I hereby certify that this correspondence is being transmitted via facsimile to the United States Patent and Trademark Office on November 2, 2004.

By: 

Name: Patricia Cygan

Commissioner for Patents
Alexandria, VA 22313-1450

Sir:

We are transmitting herewith the attached correspondence relating to this application:

- ☒ Transmittal sheet containing Certificate of Mailing
☒ Response to Restriction Requirement (2 pgs.)

Please apply any charges not covered, or any credits, to Deposit Account No. 50-1778.

Date:

11/2/04

By: Name: Jason D. Kelly
Reg. No.: 54,213

SHUMAKER & SIEFFERT, P.A.
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RESPONSE TO RESTRICTION REQUIREMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This is in response to the Office Action mailed October 4, 2004.

Restriction Under 35 U.S.C. § 121

In the Office Action, the Examiner restricted claims 1-42 under 35 U.S.C. § 121 as follows:

Group I. Claims 1-8, 15-22, and 29-42, and

Group II. Claims 9-14 and 23-27.

Applicant elects Group I (claims 1-8, 15-22 and 29-42) without traverse.

CONCLUSION

All claims in this application are in condition for allowance. Applicant respectfully requests reconsideration and prompt allowance of all pending claims. Please charge any

Application Number 09/992,708
Amendment dated November 2, 2004
Responsive to Office Action mailed October 4, 2004

additional fees or credit any overpayment to deposit account number 50-1778. The Examiner is invited to telephone the below-signed attorney to discuss this application.

Date:

11/2/04

SHUMAKER & SIEFFERT, P.A.
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By:



Name: Jason D. Kelly
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